

FY 2019 INSPECTION CONCLUSION DATA SHEET (ICDS)

EPA Region 10

CWA 311

ICDS data is required to be reported for all on-site compliance inspections conducted by EPA inspectors, Senior Environmental Employees, or EPA contractors. States and tribes are not required to report ICDS data even if using EPA credentials. This form requires the inspector to provide the requested information by entering data in a text box, or checking the applicable box in a multi-select pick list. **DO NOT MODIFY FORM**

Compliance Activity Type: Inspection/Evaluation

1. EPA Lead Inspector:

First & Last Name:	Richard Franklin
Telephone # (include area code):	(b)(6)

2. Compliance Monitoring Dates: *(mm/dd/yyyy of inspection)*

Actual Start Date:	11/30/2022
Actual End Date:	11/30/2022

3. Compliance Monitoring Activity Name:

This is a descriptive name to help identify the compliance monitoring activity (e.g., *Shoreside Petroleum Inc – Cordova Terminal*).

Little Goose Lock & Dam – SPCC Inspection

4. On-Site Facility Representative? *(Check No or Yes)*

<input type="checkbox"/>	No												
<input checked="" type="checkbox"/>	Yes → If checked, provide the following information:												
	<table border="1"> <tr> <td>First & Last Name:</td> <td>Justin Stegall</td> </tr> <tr> <td>Individual's Title:</td> <td>Operations Project Manager</td> </tr> <tr> <td>Organization:</td> <td>U.S. Army Corps of Engineers</td> </tr> <tr> <td>Telephone # (include area code):</td> <td>(509) 399-2233</td> </tr> <tr> <td>Mobile #:</td> <td>N/A</td> </tr> <tr> <td>Email Address:</td> <td>justin.stegall@usace.army.mil</td> </tr> </table>	First & Last Name:	Justin Stegall	Individual's Title:	Operations Project Manager	Organization:	U.S. Army Corps of Engineers	Telephone # (include area code):	(509) 399-2233	Mobile #:	N/A	Email Address:	justin.stegall@usace.army.mil
First & Last Name:	Justin Stegall												
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Mobile #:	N/A												
Email Address:	justin.stegall@usace.army.mil												

5. Linked Facility:**A. Media-Specific Programmatic ID:**

For CWA 311 facilities, this is the assigned **OIL Interest** (e.g., *OIL R10-AK-00625*). ONE & only one Programmatic ID must be linked to the Inspection in ICIS. *(If Oil Interest is not provided; the inspection will be linked to an ICIS Interest)*

SPCC-WA-2023-00002

B. Facility Site Name & Physical Location of Site Inspected:

Commercial Name of the Facility:	Little Goose Lock ands Dam
Street Address or Detailed Description:	1001 Little Goose Dam Road
City:	Dayton
County:	Walla Walla
State & Zip Code:	WA 99328
Section/Township/Range: <i>(if known)</i>	N/A

C. Facility Latitude & Longitude: *(Decimal Degrees only)*

Latitude: (e.g., +60.577)	46.58436
Longitude: (e.g., -145.755)	-118.02695

D. Is facility site within Tribal Land? *(Check No or Yes)*

<input checked="" type="checkbox"/>	No
<input type="checkbox"/>	Yes → Enter Tribal Land Name in text box below:
	<input type="text"/>

E. Environmental Justice Area?This information is being collected for the National Oil Database. *(Check No or Yes)*

<input checked="" type="checkbox"/>	No
<input type="checkbox"/>	Yes

F. Year facility began oil storage operations?This information is being collected for the National Oil Database. *(If applicable, provide year)*

1970

G. NAICS Codes: CTRL+Click to follow this link: [2017 NAICS Search](#)*(Enter all 6-digit NAICS codes corresponding to the site/facility in text box below)*

Primary NAICS: (enter only one code)	221111		
Other NAICS: (enter all applicable codes)			

H. Facility Type of Ownership:This information is specific to facility ownership; not inspection activity. *(Check only ONE)*

<input type="checkbox"/>	Corporation
<input type="checkbox"/>	County Government
<input type="checkbox"/>	District
<input type="checkbox"/>	Mixed Ownership (e.g., Public/Private)
<input type="checkbox"/>	Municipal or Water District
<input type="checkbox"/>	Municipality
<input type="checkbox"/>	Non-Government
<input type="checkbox"/>	Privately Owned Facility
<input type="checkbox"/>	School District
<input type="checkbox"/>	State Government
<input type="checkbox"/>	Tribal Government
<input checked="" type="checkbox"/>	Federal Facility (U.S. Government) → Enter Federal Agency Name in text box below:
	<input type="text" value="U.S. Army Corps of Engineers"/>

I. Small Business Indicator:

This flag indicates if the Facility meets the requirements of the EPA Small Business Policy.

EPA's Small Business Compliance Policy defines a small business as "a person, corporation, partnership or other entity that employs 100 or fewer individuals (across all facilities and operations owned by the small business)." This policy further states that "The number of employees should be considered as full-time equivalents on an annual basis, including contract employees." The definition of a small municipality (in terms of a small business) is a local government serving 3,300 or fewer residents. *(Check No or Yes)*

<input checked="" type="checkbox"/>	No
<input type="checkbox"/>	Yes

6. Federal Statute | Law Section | Program:

This is the statute & section of the corresponding regulation associated with the inspection, & the program that is authorizing the Activity or being violated. *(Check only ONE)*

	CWA	311: Oil & Hazardous Substance Liability	FRP
X	CWA	311: Oil & Hazardous Substance Liability	SPCC
	CWA	311: Oil & Hazardous Substance Liability	SPILLS

7. Compliance Monitoring (CM) Action Reason:

This is the description that identifies the purpose of a Compliance Monitoring Activity.

(Check either Core Program or Agency Priority. If ONE of the Other CM Action Reasons applies, it should also be checked.)

X	Core Program
	Agency Priority → If checked, proceed to ICDS line 8 & identify the applicable OECA National Priority
	Other - Case Development
	Other - Citizen Complaint/Tip
	Other - For Cause
	Other - Oversight
	Other - Random inspection
	Other - Result of Spill
	Other - Selected Monitoring Action

8. FY 2018 OECA National Priority:

This is the description that identifies the national priority that prompted the initiation of the inspection. *(If Agency Priority was checked in ICDS line 7, you must check the National Priority in table below.)*

	2018 – Energy Extraction – Land Based Gas Extraction & Production
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9. Compliance Monitoring Type:

This is the description indicating the type of compliance monitoring activity conducted by a regulatory agency. *(Check only ONE)*

	Comprehensive Type Inspections (designed to comprehensively determine compliance with the regulations & capture the most common & complete inspections)
	Audit
	Diagnostic
	Evaluation
X	Plan Review
	Sampling
	Schedule Evaluation
	Alternative Type Inspections (designed to capture less through, unique or unusual compliance monitoring activities)
	Aerial Photography
	Case Development
	Field Screening Sample
	Focused
	Follow-up
	Illegal Operators
	Reconnaissance with Sampling
	Reconnaissance without Sampling
	Self-Certification Verification
	Witness Response Drill
	Oversight (Federal Oversight inspections conducted to ensure the integrity of a State's compliance monitoring program) → If checked, skip ICDS lines 13 & 16-21

10. Compliance Monitoring Agency Type: *(Check only ONE)*

<input checked="" type="checkbox"/>	U.S. EPA
<input type="checkbox"/>	EPA Contractor
<input type="checkbox"/>	Other-EPA (i.e., Senior Environmental Employees (SEE), National Enforcement Investigations Center (NEIC))

11. Was this a State, Federal or Joint (State/Federal) Compliance Monitoring Activity?*(Check either State, Federal or Joint)*

<input type="checkbox"/>	State										
<input checked="" type="checkbox"/>	Federal										
<input type="checkbox"/>	Joint (State/Federal) → If Joint , you must answer the following two questions:										
1) If Joint, what was the purpose of the participation of the other party? <i>(Check only ONE)</i> <table border="1"> <tr> <td><input type="checkbox"/></td> <td>True Joint Inspection with EPA & State</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Oversight Purposes</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Training Purposes</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Assist the State</td> </tr> </table>		<input type="checkbox"/>	True Joint Inspection with EPA & State	<input type="checkbox"/>	Oversight Purposes	<input type="checkbox"/>	Training Purposes	<input type="checkbox"/>	Assist the State		
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<input type="checkbox"/>	Oversight Purposes										
<input type="checkbox"/>	Training Purposes										
<input type="checkbox"/>	Assist the State										
2) Which Party had the lead (in the Joint inspection)? <i>(Check State or EPA)</i> <table border="1"> <tr> <td><input type="checkbox"/></td> <td>State → If State, you must answer the following question:</td> </tr> <tr> <td colspan="2"> If State, Local or Tribal lead, did EPA assist? <i>(Check No or Yes)</i> <table border="1"> <tr> <td><input type="checkbox"/></td> <td>No</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Yes</td> </tr> </table> </td> </tr> <tr> <td><input type="checkbox"/></td> <td>EPA</td> </tr> </table>		<input type="checkbox"/>	State → If State , you must answer the following question:	If State, Local or Tribal lead, did EPA assist? <i>(Check No or Yes)</i> <table border="1"> <tr> <td><input type="checkbox"/></td> <td>No</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Yes</td> </tr> </table>		<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	EPA
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<input type="checkbox"/>	No										
<input type="checkbox"/>	Yes										
<input type="checkbox"/>	EPA										

12. Media Monitored: *(Check only ONE)*

<input checked="" type="checkbox"/>	Water (navigable/surface)
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13. Compliance Monitoring Media Indicator: *(Check if Multimedia inspection)*

<input type="checkbox"/>	Multimedia Indicator
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14. Cross Media Indicator: Federal Facility Activity:This is an indication that directly marks the inspection activity as involving Federal Facilities. *(Check only ONE)*

<input checked="" type="checkbox"/>	Federal Facility (traditional federal facility, military base, federal land or federal agency impacting private property)	
<input type="checkbox"/>	No Federal Facility Involvement (no federal agency or federal property are involved)	
<input type="checkbox"/>	Non-Federal Party Impacting Federal Property (activity involving contractors on federal property or spills migrating to federal property)	
→ If checked, describe the Federal Property being "impacted" (i.e., National Forest, BLM land, etc.) in text box below: <table border="1" style="width: 100%;"> <tr> <td style="height: 20px;"></td> </tr> </table>		

15. Compliance Monitoring Action Outcome:This identifies the outcome of the inspection, if known at the time of activity. *(Check only ONE)*

<input type="checkbox"/>	Immediately Corrected
<input type="checkbox"/>	No Compliance Monitoring (Access Denied)
<input type="checkbox"/>	No Compliance Monitoring (Facility Shut Down)
<input type="checkbox"/>	No Violation
<input checked="" type="checkbox"/>	Not Immediately Corrected
<input type="checkbox"/>	Under Review

16. Did you observe deficiencies (potential violations) during the on-site inspection? (Check No or Yes)

<input type="checkbox"/>	No → If checked, skip to ICDS line 20
<input checked="" type="checkbox"/>	Yes → If checked, you must identify the Deficiencies observed in table below

Deficiencies observed: (Check all applicable)

<input type="checkbox"/>	Potential excess emission in violation of regulations
<input type="checkbox"/>	Potential failure to complete or submit a notification, report, certification, or manifest
<input type="checkbox"/>	Potential failure to follow a permit condition (s)
<input type="checkbox"/>	Potential failure to follow a required sample monitoring procedure or laboratory procedure
<input checked="" type="checkbox"/>	Potential failure to follow or develop a required management practice or procedure
<input type="checkbox"/>	Potential failure to identify and manage a regulated waste or pollutant in any media
<input checked="" type="checkbox"/>	Potential failure to maintain a record or failure to disclose a document
<input type="checkbox"/>	Potential failure to maintain/inspect/repair meters, sensors, & recording equipment
<input type="checkbox"/>	Potential failure to obtain a permit, product approval, or certification
<input type="checkbox"/>	Potential failure to report regulated events such as spills, accidents, etc.
<input type="checkbox"/>	Potential incorrect use of material (pesticide, waste, product) or use of unapproved material
<input type="checkbox"/>	Potential violation of a compliance schedule in an enforceable order

17. If you observed deficiencies, did you communicate the deficiencies to the Facility during the inspection? (Check No or Yes)

<input type="checkbox"/>	No → If checked, skip to ICDS line 20
<input checked="" type="checkbox"/>	Yes → If checked, proceed to ICDS line 19

18. Did you observe the Facility take any actions during the inspection to address the deficiencies noted?

(Check No or Yes)

<input checked="" type="checkbox"/>	No → If checked, skip to ICDS line 20
<input type="checkbox"/>	Yes → If checked, you must identify Actions taken in table below

Action(s) taken: (Check only actions observed/seen)

<input type="checkbox"/>	Complete(d) a Notification or Report	
<input type="checkbox"/>	Correct(ed) Monitoring Deficiencies	
<input type="checkbox"/>	Correct(ed) Record Keeping Deficiencies	
<input type="checkbox"/>	Implemented New or Improved Management Practices or Procedures	
<input type="checkbox"/>	Improved Pollutant Identification (e.g., Labeling, Manifesting, Storage, etc.)	
<input type="checkbox"/>	Request(ed) a Permit Application or Applied for a Permit	
<input type="checkbox"/>	Verified Compliance with Previously Issued Enforcement Action – Part or All Conditions	
<input type="checkbox"/>	Reduced Pollution (e.g., Use Reduction, Industrial Process Change, Emissions or Discharge Change, etc.)	
<input type="checkbox"/>	<p>→ If Reduced Pollution is checked, you must specify at least one Pollutant in the table below. CTRL+Click to follow this link: ICIS Pollutant Reference Table for complete list of available Pollutants. Include the complete Pollutant Description, not the Pollutant Code.</p> <table border="1" style="width: 100%;"> <tr><td> </td></tr> </table>	

19. Did you provide general Compliance Assistance in accordance with the policy on the role of the EPA Inspector in providing Compliance Assistance during inspections? (Check No or Yes)

<input type="checkbox"/>	No
<input checked="" type="checkbox"/>	Yes

20. Did you provide **site-specific Compliance Assistance** in accordance with the policy on the role of the EPA Inspector in providing Compliance Assistance *during* the inspections? (Check No or Yes)

	No
X	Yes

21. Inspector Comments or Additional Information: (Optional; keep brief)

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Data Collection Process:

- Inspector is responsible for collection of ICDS data during the on-site inspection.
- Inspector should complete the electronic ICDS *during or immediately after* the inspection is conducted.
- Inspector should email the electronic ICDS to first-line supervisor/designated alternate within five (5) days after returning from either a single inspection, or a series of inspections.
- The first-line supervisor/designated alternate should ensure ICDS data is collected & reported, and that the data is complete & accurate. Once the supervisor/designated alternate review is complete, the electronic ICDS should be emailed to the designated data steward(s) for direct entry into both ICIS and the National Oil Database. For CWA 311, email the electronic ICDS to Annette Rife at rife.annette@epa.gov (for entry into ICIS), and _____ at _____@epa.gov (for entry into Oil Database; without enabling the ICIS connection).

ICDS Sign Off	Printed Name	Date Completed
ICDS Completed by Inspector	Richard Franklin	12/24/2022
ICDS Review Completed by Supervisor/Designated Alternate	Kate Spaulding	
ICDS Data Entry into ICIS Completed by CWA Data Manager	Annette Rife	
ICDS Data Entry into National Oil DB Completed by Oil DB Data Steward		